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APPLICANTS

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** CONTINUING DATA ***** *RWM* *****
 This appln claims benefit of 60/193,945 03/31/2000

** FOREIGN APPLICATIONS ***** *None-RWM* *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
 ** 04/12/2001

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY MD	SHEETS DRAWING 2	TOTAL CLAIMS 32	INDEPENDENT CLAIMS 4
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Verified and Acknowledged
 Examiner's Signature *RWM* Initials

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TITLE
 Electronically acquiring and distributing insurnace policy data to agent offices

FILING FEE RECEIVED 1006	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue)
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